

# Serving Michigan... Serving You

# 1999/2000 ANNUAL REPORT OF THE BUREAU OF HEALTH SERVICES

Michigan Department of Consumer & Industry Services
Bureau of Health Services
P.O. Box 30670
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John Engler, Governor Kathleen M. Wilbur, Department Director

Authority: Act 368 of 1978, as amended Total Copies – 450; Total Cost - \$769.50; Unit Cost - \$1.71

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## **Bureau of Health Services**

Thomas C. Lindsay II, Director	(517) 373-8068
Health Professional Recovery Program	(800) 453-3784
Web Site Address	www.cis.state.mi.us

## **Licensing Division**

Melanie Brim, Director	(517) 373-6873
Application Section	(517) 335-0918
Board Support Section	(517) 335-0918
Program Operations Section	(517) 335-0918
Education, Testing and Credentials	(517) 335-0918

## **Regulatory Division**

Robert Ulieru, Director	(517) 373-1737
Investigation Section (Lansing)	(517) 373-1737
Investigation Section (Detroit)	(313) 256-2840
Investigation Section (Grand Rapids)	(616) 363-5600
Pharmacy Programs (Lansing)	(517) 373-1737
Official Prescription Program	(517) 373-1737

# **Complaint and Allegation Division**

Robert Echols, Director	(517) 335-7212
Allegation Section	(517) 373-9196
Complaint Section	(517) 373-4972

## **Bureau of Health Services**

# Fiscal Year 1999/2000 Budget

Appropriated F.T.E.=s	108.0
Legislative Appropriation	\$11,875,400
FINANCIAL PLAN:	
Board Per Diem	\$50,000
Salary and Wages Longevity and Insurance Retirement	4,773,184 774,191 886,275
Communications	108,640
Travel	208,440
Contractual Services	2,487,758
Consulting Services	0
Supplies and Materials	434,540
Equipment	77,030
Grants	300,000
TOTAL	\$10,100,058

### 1999/2000 Promulgated Rules

#### Chiropractic

#### R 338.12002

Eliminates a deadline date for an application by examination.

#### R 338.12003

Sets forth the examination requirement for applications filed on or after January 2, 2001.

#### R 338.12004

Sets forth the requirements for licensure by endorsement.

#### R 338.12005

Approves and adopts the National Board of Chiropractic Examiners, parts I, II and III.

#### R 338.12006

Updates the adoption of the most current accreditation standards for chiropractic educational programs.

#### R 338.12007

Rescinds the rule on temporary licenses.

#### R 338.12008

Updates the rules concerning license renewal and relicensure.

#### R 338.12008A

Updates and revises the rules on continuing education and approval of programs.

#### Medicine

#### R 338.2304

Establishes the requirements for a physician to delegate the prescribing of controlled substances to physician's assistants.

#### R 338,2305

Establishes the requirements for a physician to delegate the prescribing of controlled substances to nurse practitioners or nurse midwives.

#### **Nursing**

#### R 338.10701

Amends definitions to include Nurse Professional Fund.

#### R 338.10702

Establishes the Nurse Scholarship Fund and sets forth Board's determination of categories, areas of need and the application process.

#### R 338.10703

Sets forth eligibility requirements for nursing programs.

#### R 338.10704

Establishes the requirements for schools to award scholarships to students.

#### R 338.10705

Sets forth a hearing provision for ineligible schools.

#### **Osteopathic Medicine**

#### R 338.108a

Establishes the requirements for an osteopathic physician to delegate the prescribing of controlled substances to physician's assistants.

#### R 338.108b

Establishes the requirements for an osteopathic physician to delegate the prescribing of controlled substances to nurse practitioners or nurse midwives.

#### **Pharmacy**

#### R 338.479b

Revises the number of drug orders on a handwritten form to 4 and allows not more than 6 orders on a computer-generated form. Prescribers must clearly indicate the total number of drugs prescribed on each prescription.

#### **Licensing Program**

#### **Application Section**

The Application Section of the Licensing Division has two units. The Application Processing Unit receives and reviews applications for licensure and/or registration of health professionals. The 18,404 applications received during this fiscal year were reviewed along with supporting documentation to determine an applicant's eligibility for examination and/or licensure.

The Application Support Unit fills requests for applications and copies of laws and rules. This unit sent out 31,701 applications during this fiscal year.

#### **Board Support Section**

The Board Support Section is responsible for providing administrative support to the 19 health professional boards/committees/task forces within the Bureau of Health Services. Some of the duties include scheduling meeting dates and locations, preparing and mailing agenda materials to the board members prior to each meeting, and taking and transcribing minutes for each meeting.

In addition to the above, the following functions are also handled by this section:

- Order all forms and instructions
- Update administrative rule books as required
- Respond to Freedom of Information Act (FOIA) requests for copies of licensing files
- Microfilm all licensure/registration file updates

During FY 1999/2000, 310 FOIA requests were processed through this section.

#### **Education, Testing & Credentials Section**

The Education, Testing and Credentials Section (ETC) is responsible for the following functions:

- Review and approval of educational or training programs for the Board of Nursing and the Emergency Medical Services program
- Development and administration of examinations used in the licensure/registration process either by ETC or through contractual arrangements with national testing agencies
- Preparation of written license verifications
- Administration of the federally mandated Nurse Aide registration program including training trainers of nurse aides, training program review and approval, review of individual requests for exemption from training requirements, and contractual administration of the testing program and registry database for approximately 94,000 nurse aides
- Review and approval of continuing education programs for the Emergency Medical Services program and the Boards of Chiropractic, Dentistry, Medicine, Nursing, Optometry, Osteopathic Medicine and Surgery, Pharmacy and Podiatric Medicine and Surgery
- Processing of random audits of licensees for compliance with continuing education requirements

#### **Continuing Education Audits:**

J		Ī
Chiropractic	77 Audited 59 Complied	Optometry
Dentistry Dentists  Dental Hygienists	88 Audited 70 Complied 97 Audited 68 Complied	Osteopathic Medicine and Surgery Pharmacy
Dental Assistants	12 Audited 9 Complied	Podiatric Medicine and Surgery
Emergency Medical Personn	el	
Instructor/Coordinator	9 Audited 8 Complied	The Program Operation  for the following function
Medical First Responder	161 Audited 155 Complied	<ul> <li>for the following function</li> <li>Schedules applied given for licensure</li> </ul>
EMT Basic	59 Audited 57 Complied	<ul> <li>Processes all licer</li> <li>Maintains the dat address changes</li> </ul>
EMT Specialist	12 Audited 12 Complied	<ul> <li>Issues all health p registrations</li> <li>Enters all appli</li> </ul>
Paramedic	36 Audited 36 Complied	Tracking System  Duplicate Licenses Iss
Medicine	360 Audited 317 Complied	
Nursing		
Registered Nurses	247 Audited 220 Complied	
Practical Nurses	60 Audited 48 Complied	
Nurse Anesthetists	46 Audited 44 Complied	
Nurse Midwives	10 Audited 10 Complied	
Nurse Practitioners	56 Audited 55 Complied	

Optometry	48 Audited 41 Complied
Osteopathic Medicine and Surgery	111 Audited 92 Complied
Pharmacy	150 Complied 127 Complied
Podiatric Medicine and Surgery	13 Audited

#### Section

ons Section is responsible ions:

- icants for examinations e or registration
- ense renewals
- ata base with name and and license level
- professional licenses and
- olications onto Batman

sued: 3,085

## **Licensing Statistics**

Professions Licensees	Applications Received	Examinations # of Applicants	Written Verifications/ Certifications	Renewai Li	ls Total censees
Chiropractic Chiropractors	349	11 (2 passed)	150	1,370	2,674
Counseling Counselors Limited	294 302	(National Exam) (No Exam)	30	2,370 821	5,138 991
Dentistry Dentists Dental Specialists Dental Hygienists Dental Assistants	339 9 396 89	(Regional Exam) 25 (24 Passed) (Regional Exam) 87 (44 Passed)	166 0 115 0	2,517 356 2,822 312	7,661 1,039 8,556 982
Emergency Medical Per Medical First Respond EMT – Basic EMT – Specialist Paramedic Instructor/Coordinator	ler		0 15 1 14 0	5,191	11,105 10,573 1,697 5,880 831
Marriage and Family Therapy Marriage and Family Therapists	56	(National Exam)	2	502	1,012
Medicine Medical Doctors	3,023	588 (451 Passed)	3,262	11,212	32,037
Nurse Aides		9,003		8,706	35,470
Nursing Registered Nurses Nurse Specialists Practical Nurses Trained Attendants	5,692 408 1,506	3,425 (2,710 Passed) 982 (866 Passed)	3,479 340	53,444 1,790 12,942 2	111,768 3,944 28,047 2
Occupational Therapy Occupational Therapists Occupational Therapy Asst	413 s. 80	(National Exam) (National Exam)	113 7	1,904 379	3,574 817

Professions Licensees	Applications Received	Examinations # of Applicants	Written Verifications/ Certifications	Renewals Lice	Total ensees
Optometry Optometrists	159	46 (44)	19	703	1,499
Osteopathic Medicine and Surgery Osteopathic Doctors	676	(National Exam)	524	2,118	6,501
Pharmacy Pharmacists Jurisprudence	956	320 (281 Passed) 536 (492 Passed)	386	6,121	11,631
Pharmacies  Manufacturer/Wholesaler	228 111	(No Exam) (No Exam)	6 38	1,205 242	2,379 550
Physical Therapy Physical Therapists	485	609 (373 Passed)	249	2,925	6,315
Physician-s Assistant Physician Assistants	232	(National Exam)	95	818	1,723
Podiatric Medicine and Surgery Podiatrists	71	21 (18 Passed)	25	256	799
Psychology Psychologists Doctoral Limited Masters Limited Temporary Limited	173 215 101 246	110 (64 Passed)	94	1,198 160 1,598	2,487 336 3,341 514
Sanitarian Sanitarians	35	10 (9 Passed)	4	297	561
Social Work (all lic types Social Work Technician Social Worker Certified Social Worker	n N	(No exam) (No exam) (No exam)	126	410 2,338 2,118	1,868 10,172 12,710
Veterinary Medicine Veterinarians	300	Natil - 117 (87 Passe	,	1,523	3,399
Veterinary Technicians	78	CCT - 118 (106 Passe 87 (75 Passed)	ed) 1	658	1,325
TOTAL LICENSEES				*3	36,925

<sup>\*</sup>does not include nurse or dental specialists

# **Department of Consumer & Industry Services Bureau of Health Services**

# **Disciplinary Actions**

Board	Reprimand	Probation	Fine	Voluntary Surrender	Limited License	Suspension	Revocation	TOTAL
Chiropractic	2	23	2	3	1	7	3	41
Counseling	0	1	0	0	1	1	0	3
Dentistry	4	34	14	3	3	12	0	70
EMS Personn	iel 0	0	0	0	0	0	0	0
Marriage & Family Therap	0 Dy	0	0	1	0	1	0	2
Medicine	6	36	13	5	14	27	3	104
Nursing	6	83	12	8	28	103	4	244
Occupational Therapy	0	0	0	0	0	0	0	0
Optometry	0	7	1	0	0	0	0	8
Osteopathic Med & Surger	О	6	5	2	1	8	2	24
Pharmacy	43	25	16	2	13	9	3	111
Physical Ther	ару 0	0	1	0	0	0	2	3
Physician's A	ssts. 0	5	1	0	0	1	0	7
Podiatric Med & Surger	О	0	0	0	1	2	0	3
Psychology	0	2	0	0	2	5	0	9
Sanitarians	0	0	0	0	0	0	0	0
Social Work	0	1	0	0	0	2	3	6
Veterinary Medicine	0	1	1	0	1	1	0	4
BUREAU TOTA	ALS 61	224	66	24	65	179	20	639

# Advisory Committee on Pain And Symptom Management

The Advisory Committee on Pain and Symptom Management was established by Public Act 421 through 426 of 1998, with an effective date of April 1, 1999. The Advisory Committee was established through chronic pain legislation designed to enhance the quality of care for pain and symptom management for Michigan citizens while reducing and removing roadblocks. The Committee is composed of a wide range of health care practitioners, along with representation from the general public and a chronic pain sufferer. The Committee is charged with identifying citizen issues and making recommendations on model core curricula for health professionals, providing consumers with information regarding treatment of intractable pain, and developing and publishing a brochure on intractable pain.

The Advisory Committee held a public hearing on June 20, 2000, to seek testimony and information from chronic pain sufferers and their families concerning their experiences in the treatment of pain.

The Committee consists of 15 voting members:

Lindsay II, Thomas C., Chairperson Dept. of Consumer & Industry Services

Beckmeyer III, Henry E., D.O. East Lansing

Dobritt, Dennis W., D.O. Bloomfield Hills

Ellenberg, Maury R., M.D. Detroit

Felt, J. Kay, J.D. Detroit

Golembiewski, Julie A., Pharm.D. Ann Arbor

Hamel, Robert, P.A. Ann Arbor

Haveman, Jr., James, Director Dept. of Community Health

Jacox, Ada, R.N., Ph.D. Detroit

Jeffers, Gary E., D.M.D. Northville

Kinsora, Valerie Lansing

Lanzisera, Philip J., Ph.D. Detroit

Giovanni Monge, Sister Mary, R.N. Livonia

Mullin, Vildan, M.D. Ann Arbor

Ogle, Karen, M.D. East Lansing

Rose, Susan, D.O. Brighton

VandeKieft, Gregg K., M.D. East Lansing

Wiener, Steven M., M.D. West Bloomfield

# Task Force on Internet Pharmacies and Prescribing

The Task Force on Internet Pharmacies and Prescribing was established by Director Kathleen M. Wilbur in January 2000. The Task Force was charged with reviewing current law and rules potentially affecting internet prescribing and health care; discussing security and privacy issues; and reviewing activities and regulations of other states.

The Task Force issued a draft document in August 2000 and held a public hearing on September 20, 2000, to seek input on the document.

The Task Force consists of 16 members:

Lindsay II, Thomas C., Chairperson Dept. of Consumer & Industry Services

Coley, Deborah, R.N., M.S. Ann Arbor

Difiore, Martin
DaimlerChrysler, Auburn Hills

Isaacs, Carol, J.D., Deputy Director Dept. of Community Health

Kirman, Cynthia, Pharm.D. General Motors, Detroit

Lekas, Nicholas, M.D. Dearborn

Meyer, Larry, Chief Executive Officer Michigan Retailers Association

Miller, Douglas, R.Ph. Board of Pharmacy

Moiles, Joan Insurance Bureau Dept. of Consumer & Industry Services

Rhule, Ronald, D.O. Board of Osteopathic Medicine and Surgery Sauer, Harold, M.D. Lansing

Sawabini, George, D.O. Plymouth

Swanson, Rita, Pharm.D.

Department of Management and Budget

Talamonti, Walter, M.D. Ford Motor Corporation, Dearborn

Wagenknecht, Larry, R.Ph. Michigan Pharmacists Association

Warren, Duane, Pharm.D.
Michigan Hospice & Palliative
Care Organization

# **Controlled Substances Advisory Commission**

The Controlled Substances Advisory Commission was established by Public Act 60 of 1988, to monitor indicators of controlled substance abuse and diversion and to recommend actions to address diversion and to recommend actions to address identified problems of abuse and diversion. The Commission consists of 13 voting members and 7 ex-officio members.

Rogg, Jeffrey T., Chairperson Public Member Alpena

Born, Tammy, D.O.

Board of Osteopathic Medicine and Surgery Caledonia

Collins, James Wesley, Ph.D.

Public Member

Detroit

Emiley, Terrence, D.P.M.

Board of Podiatric Medicine and Surgery Grand Rapids

Ervin. Edward. Ph.D.

Professional member

Kalamazoo

Gahan, Thomas F., R.Ph.

Board of Pharmacy

Γrov

Hotchkiss, Linda S., M.D.

**Board of Medicine** 

Grosse Pointe Park

Miller, Norman S., M.D.

Pharmacology Profession

East Lansing

O'Handley, Patricia, D.V.M.

Board of Veterinary Medicine

East Lansing

Perkins, Holly A., M.D.

Psychiatry Profession

West Bloomfield

Renfrew, William F., Rev.

**Public Member** 

Lansing

Tuck, Martin J., D.D.S.

**Board of Dentistry** 

East Lansing

Underwood, Patricia, Ph.D., R.N., M.S.N. Board of Nursing

Portage

Baran, Rosalie, R.Ph.

**Drug Control Administrator** 

Dept. of Consumer & Industry Services

Wilson, Larry, Det./Lt.

Criminal Investigation Division

Michigan State Police

Vacant

Family Independence Agency

Vacant

Dept. of Education

Kenyon, James, R.Ph., Supervisor

Bureau of Health Services Review

Medical Services Administration

Dept. of Community Health

Lindsay II, Thomas C., Director

Bureau of Health Services

Dept. of Consumer & Industry Services

Marderosian, Howard C.

Assistant Attorney General In Charge

Health Professionals Division

Dept. of Attorney General

#### Schedule of Commission Meetings Fiscal Year 1999/2000

October 20, 1999 January 5, 2000 April 26, 2000 July 26, 2000

#### OFFICIAL PRESCRIPTION PROGRAM

The Controlled Substances Advisory Commission (CSAC) continued their emphasis to cultivate greater understanding of the Official Prescription Program (OPP).

A patient feedback form was distributed by the CSAC. The comments received from patients and caregivers indicate their main concerns are cost of the schedule 2 drugs used in pain management and the lack of availability of the drugs at all pharmacies.

# Department of Consumer & Industry Services Bureau of Health Services

The CSAC continued its emphasis on greater understanding of the OPP by giving numerous educational presentations to professional groups. The presentations covered the type of data collected, length of time data is stored, how the data is evaluated and used, and the extent of the use of the data in disciplinary proceedings against health professionals. The presentation also covers why the program came into existence and the effectiveness of the OPP.

The CSAC reviewed the data for 1998. The 1998 data shows declines in the number of prescriptions issued for meperidine and dextroamphetamine and a slight increase for hydromorphone prescriptions. Oxycodone prescription numbers rose from 1997. Further evaluation of the oxycodone prescriptions shows the increase in prescriptions for oxycodone is due to the single entity oxycodone product.

The 1998 data shows increases for morphine and fentanyl prescriptions. The data showed a 77% increase in the number of prescriptions for amphetamines from 1997. Amphetamine and dextroamphetamine combined account for approximately 30% of the prescriptions submitted to the program in 1998.

The monthly average of official prescription forms utilized in 1998 continued to increase, averaging approximately 32,900 per month.

The 1998 data does not include methylphenidate which was removed from the requirement to be on the official form in 1994.

Stephanie Crawford, Ph.D., presented an overview on her research project entitled *Prescription Monitoring: Physician Attitudes and Patterns*. Dr. Crawford is utilizing the OPP data in this project.

# Health Professional Recovery Committee

The Health Professional Recovery Committee (HPRC) was created by Public Act 80 of 1993, effective April 1, 1994. Section 333.16167 describes the Committees duties as follows:

ASec. 16167. The committee shall do all of the following:

- (a) Establish the general components of the health professional recovery program and a mechanism for monitoring health professionals who may be impaired.
- (b) Subject to sections 16169 and 16170 and in conjunction with the health professional recovery program consultants described in section 16168, develop and implement criteria for the identification, assessment, and treatment of health professionals who may be impaired.
- (c) In conjunction with the health professional recovery program consultants described in section 16168, develop and implement mechanisms for the evaluation of continuing care or aftercare plans for health professionals who may be impaired.
- (d) Develop a mechanism and criteria for the referral of a health professional who may be impaired to a professional association when appropriate for the purpose of providing assistance to the health professional. In developing criteria under this subdivision, the committee shall require that a referral be made only with the consent of the health professional.
- (e) Annually report to each board and the physician's assistants task force created under this article on the status of the health professional recovery program. The committee shall include in the report, at a minimum, statistical information on the level of participation in the program of each health profession. The committee may include in the report recommendations for changes in the health professional recovery program and for participation by the boards and the physician's assistants task force, professional associations, substance abuse treatment and prevention programs, and other appropriate agencies.@

The health profession boards and the Director of the Department of Consumer & Industry Services appoint members in accordance with section 16165 of the Michigan Public Health Code.

#### Schedule of Committee Meetings Fiscal Year 1999/2000

December 7, 1999 January 18, 2000 March 14, 2000 June 20, 2000 September 19, 2000

#### Member Appointed By

**Term Expires** 

12/31/01

Kovach, Judith, Ph.D., Chairperson Board of Psychology	12/31/01
Bendix, Stephen A., M.D. Board of Medicine	12/31/01
Boyle, Michael F., D.O., Vice Chair	12/31/01
Board of Osteopathic Medicine and	Surgery
Brenner, Phyllis, Ph.D., R.N.	12/31/01
Board of Nursing	
Buto, Anthony, D.P.M.	12/31/01
Board of Podiatric Medicine and	
Cloud, Jack L., L.P.C.	12/31/01
Board of Counseling	12/01/01
Dallas, John Lafayette, D.C.	12/31/01
Board of Chiropractic	12/31/01
Daly, Jr., Donald V., P.A.	
Task Force on Physicians' Assis	tanta
•	
Fields, Mitchel A., R.Ph.	12/31/01
Board of Pharmacy	40/04/04
Howells, Valerie L., Ph.D., O.T.R.	
Board of Occupational Therapist	is .
Lindsay II, Thomas C., Ex-Officio	
Bureau of Health Services	
Representing Department Direct	
Marin, Chris A.	12/31/01
Public Member	
Appointed by Department Direct	or
Paffenbarger, Ralph, D.D.S.	12/31/01
Board of Dentistry	
Paxton, William S.	12/31/01
Board of Social Work	
Poag, Clyde, A.C.S.W.	12/31/01
Public Member	
Appointed by Department Direct	or

Raymond, Marilyn J., P.T.

Board of Physical Therapy

Stein, Edward F., O.D.

Board of Optometry
Tackitt, Steven R., R.S.
Represents Sanitarians
Violante, Judy, D.V.M.
Board of Veterinary Medicine
Whitelaw, Glenn D.C., A.C.S.W.
Board of Marriage and Family Therapy

#### **Accomplishments**

Accomplishments this year include:

- Over 70 educational presentations on the HPRP to various organizations.
- ► Development of a 30 minute video that is designed to promote the HPRP. The video tells the story of several health care professionals who have had these problems and how the HPRP has helped them.
- Ongoing development of a researchable database for case management and statistical reporting.
- Reports to the licensing boards on the HPRP.

#### **Michigan Board of Chiropractic**

The Michigan Board of Chiropractic was originally formed with the enactment of Public Act 145 of 1933. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of chiropractic as defined in the Public Health Code means that discipline within the health arts which deals with the nervous system and its relationship to the spinal column and its inter-relationship with other body systems.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners and verifying continuing education during licensure. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Chiropractic consists of 9 voting members: 5 chiropractors and 4 public members.

<b>Board Members</b>	Term Expires

Sommers, James, D.C., Chair Dexter	12/31/02
Craft, Donna, D.C., Vice Chair Brooklyn	12/31/00
Hamilton, James M., Public Member Ypsilanti	12/31/01
Klida, David J., D.C. Eastpointe	12/31/02
Nemacheck, Patricia, Public Member	12/31/03
Marquette Pettet, Jack, Public Member South Haven	12/31/01

Rubenstein, Bruce A., Public Member	12/31/01
Flint	
Settimi, Harry, D.C.	12/31/03
Lansing	

The following appointment was made on 2/7/00:

Chelenyak, Patricia L., D.C. 12/31/03 Northville (replaced Palmer)

#### Schedule of Board Meetings Fiscal Year 1999/2000

November 9, 1999 January 11, 2000 April 4, 2000 July 11, 2000 September 12, 2000

#### **Licensing Activity**

Applications Received	349
Examinations Given	11
Number of Licensees	2,674

#### **Regulatory Activity**

Allegations Received	48
Administrative Investigations	44
Field Investigations Authorized	8
Field Investigations Completed	8
Administrative Complaints Filed	36
Summary Suspensions Filed	3
Cease and Desist Orders Issued	0

Reprimand	2
Probation	23
Fine	2
Voluntary Surrender	3
Limited License	1
Suspension	7
Revocation	3
Total Disciplinary Actions	41

#### Michigan Board of Counseling

Public Act 421 of 1988, amended the Public Health Code, Public Act 368 of 1978, as amended, creating the Michigan Board of Counseling.

The Public Health Code defines the practice of counseling to mean the rendering to individuals, groups, families, organizations, or the general public a service involving the application of clinical counseling principles, methods, or procedures for the purpose of achieving social, personal, career, and emotional development and with the goal of promoting and enhancing healthy, self actualizing and satisfying lifestyles whether the services are rendered in an educational, business, health, private practice, or human services setting.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety and welfare.

The Michigan Board of Counseling consists of 11 voting members: 6 counselors, 1 mental health professional and 4 public members.

Board Member	Term Expires
--------------	--------------

Hornak, N. Joan, Ed.D., L.P.C., Chair Mt. Pleasant	6/30/01
Carr, Robert L. Public Member Ann Arbor	6/30/02
Geisler, John, L.P.C., Vice Chair	6/30/00
Kalamazoo Globensky, Barbara, Public Member	6/30/02
St. Joseph Kelley, M. Lucille, M.Ed., C.R.C., L.P.C.	6/30/01
Kelley, M. Lucille, M.Ed., C.R.C., L.P.C. Birmingham	6/30/01

McGraw, Patrick J., Public Member	6/30/02
Saginaw	- / /
Michaels, Linda, L.P.C.	6/30/03
Southgate	
Nicholson, Joanne, D.W.S.	6/30/02
Wayne	
Pfaff, Lawrence, Ed.D., L.P.C.	6/30/00
Portage	
Rinke, John, Ed.D., L.P.C.	6/30/03
Fenton	
Wood, Michael, Public Member	6/30/01
Ada	2, 2 0, 0 .

#### Schedule of Board Meetings Fiscal Year 1999/2000

December 17, 1999 February 18, 2000 (DSC only) June 16, 2000 September 15, 2000

#### **Licensing Activity**

Regulatory Activity	
Number of Licensees	6,129
Examinations Given	0
Applications Received	596

Allegations Received	12
Administrative Investigations	6
Field Investigations Authorized	9
Field Investigations Completed	6
Administrative Complaints Filed	3
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Reprimand	0
Probation	1
Fine	0
Voluntary Surrender	0
Limited License	1
Suspension	1
Revocation	0
Total Disciplinary Actions	3

#### **Michigan Board of Dentistry**

The Michigan Board of Dentistry was originally formed with the enactment of Public Act 122 of 1919. This Act regulated the practice of dentistry and dental hygiene in the State of Michigan, including providing for examination, licensing and regulation of persons practicing dentistry and dental hygiene; authorizing dental assistants; and providing for the discipline of offenders against the Act.

On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended, and included certification of specialists in the fields of orthodontics, endodontics, prosthodontics, pediatric dentistry, periodontics, oral and maxillofacial surgery, and oral pathology.

The practice of dentistry, as defined by the Public Health Code, means the diagnosis, treatment, prescription, or operation for a disease, pain, deformity, injury, or physical condition of the human tooth, teeth, alveolar process, gums or jaws, or their dependent tissues, or an offer, undertaking, attempt to do, or holding oneself out as able to do any of these acts.

The practice of dental hygiene, as defined by the Public Health Code, means practice at the assignment of a dentist in that specific area of dentistry based on specialized knowledge, formal education, and skill with particular emphasis on preventive services and oral health education.

Practice as a dental assistant, as defined by the Public Health Code, means assistance in the clinical practice of dentistry based on formal education, specialized knowledge, and skill at the assignment and under the supervision of a dentist.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all

duties, is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board of Dentistry by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Dentistry consists of 15 voting members: 7 dentists, 2 dentists who have been issued a health profession specialty certification, 2 dental hygienists, 2 registered dental assistants, and 2 public members.

<b>Board Members</b>	Term Expires
Harris, Joseph , D.D.S., Chair Detroit	6/30/01
Bloom, William, D.D.S. Warren	6/30/03
Earls, Sandra S., R.D.A. Lansing	6/30/02
Finkbeiner, Betty, R.D.A. Ann Arbor	6/30/03
Fuhs, Jr., Henry, Public Member Grand Rapids	r 6/30/03
Granger, Ginger, R.D.H. Almont	6/30/03
Hammel, Pamela W., D.D.S. Grosse Pointe	6/30/00
Herrera, S. Pamela, D.D.S., Vice Bloomfield Hills	
Johnston, Mary, R.D.H.  Lansing	6/30/01
McClorey, Colleen, Public Memb	
Robinson, Thomas, D.D.S. Sault Ste. Marie	6/30/02
Thomas, Gayle, D.D.S.  Dearborn  Titals Mortin, D.D.S.	6/30/03
Tuck, Martin, D.D.S.  Lansing	6/30/03
VanderVeen, D. Scott, D.D.S. Clarkston	6/30/00
Wieland, James L., D.D.S. Grand Rapids	6/30/02

#### Schedule of Board Meetings Fiscal Year 1999/2000

December 1, 1999 February 2, 2000 April 5, 2000 (DSC only) June 14, 2000 August 2, 2000

#### **Licensing Activity**

#### **Dentists**

Applications Received 339 Number of Licensees 7,661

#### **Dental Specialty Certifications**

Applications Received 9
Examinations Given (Clinical) 25
Number of Certified Specialists 1,039

#### **Registered Dental Hygienists**

Applications Received 396 Number of Licensees 8,556

#### **Registered Dental Assistants**

Applications Received 89
Examinations Given 87
Number of Licensees 982

#### **Regulatory Activity**

Allegations Received	303
Administrative Investigations	368
Field Investigations Authorized	80
Field Investigations Completed	89
Administrative Complaints Filed	72
Summary Suspensions Filed	7
Cease and Desist Orders Issued	3

Reprimand	4
Probation	34
Fine	14
Voluntary Surrender	3
Limited License	3
Suspension	12
Revocation	(
Total Disciplinary Actions	70

# **Emergency Medical Services Coordinating Committee**

The licensing of emergency medical services (EMS) personnel was transferred to the Bureau of Health Services in February 2000. Public Act 368 of 1978, as amended, the Public Health Code, Article 17, Part 209, provides the authority for licensing Medical First Responders, Emergency Medical Technicians, Paramedics, and Instructor/Coordinators.

Emergency medical services, as defined in the Public Health Code, means the emergency medical services personnel, ambulances, nontransport prehospital life support vehicles, aircraft transport vehicles, medical first response vehicles, and equipment required for transport or treatment of an individual requiring medical first response life support, basic life support, limited advance life support, or advanced life support.

The Emergency Medical Services Coordinating Committee serves as the advisory body to the Department for the purpose of reviewing protocols submitted to the Department for approval and consists of 25 members.

Committee Member	Term Expires
Snyder, Wayne, Chairperson Monroe	1/1/02
Bowling, Troy A.	1/1/02
Reed City	4/4/00
Bryers, Venetia	1/1/02
Escanaba	4 /4 /00
Bullen, John	1/1/02
Ann Arbor	4/4/04
Chancellor, Shirley	1/1/01
Fountain	
Chartier, Leo	1/1/01
Bloomfield Hills	
David, Dona	1/1/01
Muskegon	
DeWeese, Rep. Paul	1/1/00
Lansing	
Dixon, Jon	1/1/02
Kalamazoo	

Domeier, Robert, M.D.	1/1/03
Ann Arbor	1/1/02
Honeycutt, Linda Novi	1/1/03
Hufnagel, Paul	1/1/03
Lansing	
Keeton, Jeffrey	1/1/02
Detroit	
Kelly, Gary	1/1/02
Detroit	4 /4 /00
Krohmer, Jon, M.D.	1/1/02
Grand Rapids	4/4/02
Lamont, John, Vice Chair Petoskey	1/1/03
Langeland, Fred	1/1/02
Allendale	17 1702
Lutz, Gerald	1/1/02
Ann Arbor	
McCullough, Marc	1/1/01
Clay Township	
Meijer, Mark	1/1/02
Grand Rapids	4 /4 /04
Murtha, Patrick	1/1/01
Tawas City	1/1/03
Myers, Mary Kalamazoo	1/1/03
Shugars, Sen. Dale	1/1/00
Lansing	17 1700
Swor, Robert, D.O.	1/1/02
Royal Oak	
Wakeman, Daniel	1/1/02
Sault Ste. Marie	4 /4 /00
Wescott, Menden	1/1/03
Lewiston	1/1/01
Whiteside, Kenneth, M.D.  Lapeer	1/1/01
-5-F 22.	

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#### Michigan Board of Marriage and Family Therapy

The Michigan Board of Marriage and Family Therapy was created under Article 15 of Public Act 299 of 1980, as amended, the Occupational Code, to license and regulate the practice of marriage and family therapy in Michigan. Public Act 126 of 1995 transferred the authority of the Board of Marriage and Family Therapy to the Public Health Code, Public Act 368 of 1978, as amended.

Part 169 defines the practice of marriage and family therapy as the providing of guidance, testing, discussions, therapy, instruction, or advice that is intended to avoid, eliminate, relieve, manage or resolve marital or family conflict or discord, to create, improve, or restore marital or family harmony, or to prepare couples for marriage.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety and welfare.

The Michigan Board of Marriage and Family Therapy consists of 9 voting members: 6 marriage and family therapists and 3 public members.

#### Board Members Term Expires

Hovestadt, Alan J., Ed.D., Chair	6/30/03
Portage	
Beighley, David G., Ph.D., Vice Chair	6/30/01
Spring Lake	
Bristor, Martha W., Ph.D.	6/30/00
East Lansing	

Horak, Joseph, M.T.S., M.S.W., A.C.S.W East Grand Rapids	.6/30/02
Howard, Linda, Public Member	6/30/00
Remus	
Jones, Dorothy Harper, Ph.D.	6/30/02
East Lansing	
Lazar, Lisa, Public Member	6/30/03
Traverse City	
Olkowski, Emily, Public Member	6/30/01
Dearborn	
Stulberg, Tracey, Ph.D.	6/30/01
Birmingham	

#### Schedule of Board Meetings Fiscal Year 1999/2000

January 21, 2000 July 21, 2000

#### **Licensing Activity**

Applications Received Examinations Given Number of Licensees	56 0 1,012
Regulatory Activity	
Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued	1 0 2 2 1 0
<b>Board Disciplinary Actions</b>	
Reprimand	0

0

1

0

1

0

2

Probation Fine

Voluntary Surrender

**Total Disciplinary Actions** 

Limited License

Suspension

Revocation

#### **Michigan Board of Medicine**

The Michigan Board of Medicine was originally formed with the enactment of Public Act 237 of 1899. This act provided for the examination, regulation, licensing and registration of physicians and surgeons in the State of Michigan, and for the discipline of offenders against the Act. On January 8, 1974, a new Medical Practice Act, Public Act 185 of 1973, became effective. This Act continued in effect until September 30, 1978, when the Board's authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of medicine, as defined in the Public Health Code, means the diagnosis, treatment, prevention, cure or relieving of a human disease, ailment, defect, complaint, or other physical or mental condition, by attendance, advice, device, diagnostic test, or other means, or offering, undertaking, attempting to do, or holding oneself out as able to do, any of these acts.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of medical doctors, and requiring continuing medical education during licensure. The Board also has the obligation to take disciplinary action against licensees who have violated the Michigan Public Health Code.

The Michigan Board of Medicine consists of 19 voting members: 10 medical doctors, 1 physician's assistant, and 8 public members.

#### Board Members Term Expires

McNamee, Kenneth, M.D., Chair 12/31/03 Monroe Andrew, Gwen, Ph.D., Public Member 12/31/01 Haslett

Gadola, Preeti, Public Member	12/31/01
Haslett	
Girardot, John G., M.D.	12/31/01
Battle Creek Haskell, Gregg L., P.A. Houghton Lake	12/31/02
Hertz, Roger H., M.D., Vice Chair	12/31/01
Birmingham Hillegonds, Nancy, Public Member	12/31/01
Plymouth Hollowell, Melvin L., M.D.	12/31/01
Southfield	10/01/00
Hotchkiss, Linda S., M.D. Gross Pointe Park	12/31/03
Lawter, Kathryn, Public Member Columbiaville	12/31/01
Mack, Douglas A., M.D.	12/31/99
Grand Rapids  Martinez, Jr., Augustin, Public Member	12/21/01
Rochester Hills	12/31/01
McNamara, Paul	12/31/03
St. Johns	
Mukkamala, AppaRao, M.D. Grand Blanc	12/31/99
Neldberg, Robert, Public Member	12/31/03
Marquette	
Noble, Susan C., M.D.	12/31/01
Traverse City	10/01/00
Sauer, Harold J., M.D. East Lansing	12/31/99
Schuitmaker, Harold, Public Member Paw Paw	12/31/02
Timban, Demetrio, M.D. Harbor Beach	12/31/01

The following appointments were made on 2/2/2000:

Grant, James D., M.D. 12/31/03 Bloomfield Hills (replaced Mukkamala) Roth, Mary E., M.D. 12/31/03 West Bloomfield (replaced Sauer) Sanislow, Charles A., M.D. 12/31/03 Midland (replaced Mack)

#### Schedule of Board Meetings Fiscal Year 1999/2000

October 20, 1999 (DSC only)
 November 17, 1999
December 15, 1999 (DSC only)
 January 19, 2000
 February 16, 2000
March 15, 2000 (DSC only)
 April 12, 2000 (DSC only)
 May 17, 2000
 June 14, 2000
 July 19, 2000
August 14, 2000 (DSC only)
 September 13, 2000

#### **Licensing Activity**

Applications Received	3,023
Examinations Given	588
Number of Licensees	32,037

#### **Regulatory Activity**

Allegations Received	669
Administrative Investigations	1057
Field Investigations Authorized	237
Field Investigations Completed	244
Administrative Complaints Filed	141
Summary Suspensions Filed	12
Cease and Desist Orders Issued	0

Reprimand	6
Probation	36
Fine	13
Voluntary Surrender	5
Limited License	14
Suspension	27
Revocation	3
Total Disciplinary Actions	104

#### **Michigan Board of Nursing**

The Michigan Board of Nursing was originally created with the enactment of the Nurse Practice Act, Public Act 319 of 1909, and authority was transferred to the Anursing Practice Act of 1967" by Public Act 149 of 1967. On September 30, 1978, authority was again transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Michigan Public Health Code defines the practice of nursing in Michigan and empowers the Board to establish qualifications for nurse licensure; to establish standards for education and approve nurse education programs; develop and implement criteria for assurance of continued competency; and take disciplinary action against licensees when the health, safety, and welfare of the public has been adversely affected.

The Public Health Code establishes the Board of Nursing to consist of 23 members: 9 registered nurses (RNs), 1 nurse midwife, 1 nurse anesthetist, 1 nurse practitioner, 3 licensed practical nurses (LPNs), and 8 public members. Of the 9 registered nurses: 3 must have a master's degree with a major in nursing and be engaged in nursing education, 1 in less than a baccalaureate program; 1 in a baccalaureate or higher program and 1 in a licensed practical nurse program; 3 must have a baccalaureate degree in nursing and be engaged in nursing practice or nursing administration; and 3 must be nonbaccalaureate registered nurses engaged in nursing practice or nursing administration. The 3 licensed practical nurses must have graduated from a state-approved program of practical nurse education.

The enactment of the Public Health Code permitted LPN board members to act upon all matters except those that relate to standards for the education and training of RNs.

Decisions on such matters are concurred in solely by a majority of the RN and public board members.

During this fiscal year, the Board met to grant licenses, mete out disciplinary sanctions, review and approve nurse education programs, and to carry out all other mandates of the Code relating to the licensing and regulating of RNs and LPNs.

#### Board Member Term Expires

6/30/00
6/30/03
6/30/01
6/30/00 /15/99) 6/30/03
6/30/02
6/30/01
6/30/02
6/30/02
6/30/01
6/30/03
6/30/01
6/30/03
6/30/03
6/30/02
6/30/00
6/30/01

# **Department of Consumer & Industry Services Bureau of Health Services**

## 1999/2000 Annual Report

Underwood, Patricia W., R.N. Portage	6/30/03	Trained Attendants	
Urness, Gail E., R.N. West Bloomfield	6/30/03	Applications Received Number of Licensees	0 2
Vollmer, Geradine A., Public Member Plymouth	6/30/02	Regulatory Activity	
Welborn, Jane A., Public Member Kalamazoo	6/30/02		579
White, Dee M., Public Member	6/30/03	Allegations Received Administrative Investigations	584
Williamsburg Yablonky, Mary Jean, R.N., C.R.N.A. Dearborn	6/30/01	Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued	243 220 152 91
Schedule of Board Meetin	gs	Codoc and Design Gracie issued	Ü
Fiscal Year 1999/2000		Board Disciplinary Actions	
October 4, 1999 (DSC only November 3, 1999 December 9, 1999(DSC on January 27, 2000 February 17, 2000 (DSC on March 8, 2000 April 13, 2000 (DSC only) May 3, 2000 (DSC only) June 7, 2000 July 27, 2000 (DSC only) August 17, 2000 (DSC only) September 20, 2000	ly) ly)	Reprimand Probation Fine Voluntary Surrender Limited License Suspension Revocation Total Disciplinary Actions	6 83 12 8 28 103 4 244
Licensing Activity			
Registered Nurses			
Applications Received Examinations Given Number of Licensees	5,692 3,425 111,768		
R.N. Specialty Certificatio	ns		
Applications Received Number of Certifications	408 3,944		
Practical Nurses			
Applications Received Examinations Given Number of Licensees	1,506 982 28,047		

Michigan Board of Occupational Therapists

Public Act 473 of 1988 amended the Public Health Code, Public Act 368 of 1978, creating the Michigan Board of Occupational Therapists.

The Public Health Code mandates certain responsibilities and duties for a health professional registration board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by ascertaining minimal entry level competency of occupational therapists and occupational therapy assistants. The Board also has the obligation to take disciplinary action against registrants who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Occupational Therapists consists of 9 voting members: 5 occupational therapists and 4 public members.

Board Members	Term Expires
Mack, Sheila, O.T.R., Chair St. Clair Shores	12/31/02
Berger, Anita, Public Member Dearborn	12/31/01
Bielski, Donald C., Vice Chair Manistee - Public Member	12/31/01
Cooper, Richard G., Ed.D., O.T. Kalamazoo	.R. 12/31/01
Evans, Cynthia R., O.T.R. Lansing	12/31/00
Lori, Nancy R., Public Member Iron Mountain	12/31/03
Miller, Laura V., O.T.R. Canton	12/31/01
Plowman, John B., Public Meml Perry	ber 12/31/01
Washington, Mintie, O.T.R. Detroit	12/31/01

#### Schedule of Board Meetings Fiscal Year 1999/2000

November 2, 1999

#### **Registration Activity**

#### **Occupational Therapists**

Applications Received	413
Number of Registrants	3,574

#### **Occupational Therapy Assistants**

Applications Received	80
Number of Registrants	817

#### **Regulatory Activity**

Allegations Received	2
Administrative Investigations	2
Field Investigations Authorized	3
Field Investigations Completed	5
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

#### **Michigan Board of Optometry**

The Michigan Board of Optometry was originally formed with the enactment of Public Act 71 of 1909. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

On March 26, 1984, the Governor signed Public Act 42, which allowed optometrists to be certified to administer topical oculardiagnostic pharmaceutical agents to the anterior segment of the human eye. Rules allowing the board to certify optometrists as diagnostic agents were promulgated on July 13, 1985

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners and verifying continuing education during licensure. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Board of Optometry consists of 9 voting members: 5 optometrists and 4 public members.

#### Board Member Term Expires

Walton, Theodore B., O.D., Chair Oxford	6/30/04
Ayres, Gary, Public Member Lowell	6/30/02
Gregoricka, Jerry, Public Member Owosso	6/30/02
Habermehl, Bradley, O.D., Vice Chair Flint	6/30/04
Klein, Robert L., O.D. Kalamazoo	6/30/02
Marston-Foucher, Carol, O.D. Livonia	6/30/00
Nelson, Jr., Albert, Public Member Troy	6/30/03

Stecker, Nancy P., Public Member	6/30/03
Gaylord	
Takahashi, Joyce, O.D.	6/30/02
Ann Arbor	

The following appointment was made 7/31/00:

Seelye, Roger R. 6/30/04 Owosso (replaced Marston-Foucher)

#### Schedule of Board Meetings Fiscal Year 1999/2000

November 10, 1999
February 9, 2000
March 29, 2000 (DSC only)
May 3, 2000
August 9, 2000
September 27, 2000 (DSC only)

#### **Licensing Activity**

Applications Received	159
Examinations Given	46
Number of Licensees	1,499

#### **Regulatory Activity**

Allegations Received	16
Administrative Investigations	9
Field Investigations Authorized	2
Field Investigations Completed	3
Administrative Complaints Filed	10
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0

Reprimand	0
Probation	7
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	8

# Michigan Board of Osteopathic Medicine and Surgery

The Michigan Board of Osteopathic Medicine and Surgery was originally formed with the enactment of Public Act 162 of 1903. This Act regulated the practice of osteopathic medicine and surgery in the State of Michigan; provided for the examination, licensing and registration of osteopathic physicians and surgeons; and provided for the discipline of offenders against the Act. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of osteopathic medicine and surgery, as defined in the Public Health Code, means a separate, complete, and independent school of medicine and surgery, utilizing full methods of diagnosis and treatment in physical and mental health and disease, including the presentation and administration of drugs and biologicals, operative surgery, obstetrics, radiological and other electromagnetic emissions, and placing special emphasis on the interrelationship of the musculoskeletal system to other body systems.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners and verifying continuing medical education during licensure. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Osteopathic Medicine and Surgery consists of 9 voting members: 5 osteopathic physicians, 1 physician's assistant, and 3 public members.

<b>Board Members</b>	Term Expires
Born, Tammy, D.O., Chair Caledonia	12/31/01
Aranosian, Robert, D.O. Pontiac	12/31/02
Begick, Vaughn J., P.A. Saginaw	12/31/03
Griffin, Richard E., D.O. East Lansing	12/31/02
Helmer, Michael K., Public Me Bloomfield Hills	mber 12/31/01
LaBelle, Patricia A., Public Me Traverse City	mber 12/31/00
Rhule, Ronald, D.O. Williamston	12/31/00
Rose, Susan M., D.O., Vice Ch Brighton	nair 12/31/02
Thrall, Kathleen A., Public Mer Watersmeet	nber 12/31/03

#### Schedule of Board Meetings Fiscal Year 1999/2000

October 7, 1999 December 2, 1999 February 3, 2000 April 6, 2000 June 1, 2000 August 3, 2000

#### **Licensing Activity**

Applications Received	676
Number of Licensees	6,501

## **Regulatory Activity**

Allegations Received	198
Administrative Investigations	274
Field Investigations Authorized	60
Field Investigations Completed	57
Administrative Complaints Filed	40
Summary Suspensions Filed	7
Cease and Desist Orders Issued	0

Reprimand	0
Probation	6
Fine	5
Voluntary Surrender	2
Limited License	1
Suspension	8
Revocation	2
Total Disciplinary Actions	24

#### **Michigan Board of Pharmacy**

The Michigan Board of Pharmacy was originally formed with the enactment of Public Act 134 of 1885. On March 28, 1963, the authority of the Board to regulate the practice of pharmacy and to prescribe its powers and duties; and to prescribe penalties for violations of the act, was transferred to Public Act 151 of 1962. On September 30, 1978, authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code, Public Act 368 of 1978, as amended, defines the practice of pharmacy as a health service, the clinical application of which includes the encouragement of safety and efficacy in the prescribing, dispensing, administering and use of drugs and related articles for the prevention of illness and the maintenance and management of health.

Professional functions associated with the practice of pharmacy include the interpretation and evaluation of prescriptions; drug product selection; compounding, dispensing, safe storage, and distribution of drugs and devices; maintenance of legally required records; advising the prescriber and the patient as required regarding contents, therapeutic action, utilization, and possible adverse reactions and interactions of drugs.

The Public Health Code, by section 17722, grants authority to the Board of Pharmacy to regulate, control, and inspect the character and standards of pharmacy practice and of drugs manufactured, distributed. prescribed, dispensed, and administered or issued in this State and procure samples, and limit or prevent the sale of drugs that do not comply with this section's provisions; prescribe minimum criteria for the use of professional and technical equipment in reference to the compounding and dispensing of drugs; grant pharmacy licenses for each separate place of practice of a dispensing prescriber who meets requirements for drug control licensing; and granting licenses to manufacturer/ wholesaler distributors of prescription drugs. The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners and verifying continuing education during licensure. The Board also has the obligation to discipline licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Pharmacy consists of 11 voting members: 6 pharmacists and 5 public members.

#### Board Members Term Expires

Miller, Douglas A., R.Ph., Chair	6/30/04
Detroit Amstrong, Roberta, R.Ph.	6/30/02
Albion Benghauser, Karl, Public Member	6/30/02
Lansing Bradley, Jr., Raina, R.Ph.	6/30/03
Detroit Buck, James, Public Member	6/30/02
Grandville Durst, Stephen W., R.Ph., Vice Chair	6/30/03
Portage Gahan, Thomas, R. Ph.	6/30/01
Troy Gibson, Bonita, Public Member	6/30/03
Newberry Parker, Joyce E., Public Member	6/30/02
Farmington Hills Polley, Catherine, R.Ph.	6/30/03
Troy Pretty, Gretchen, Public Member	6/30/01
Kalamazoo	5, 55, 51

# **Department of Consumer & Industry Services Bureau of Health Services**

# 1999/2000 Annual Report

Schedule of Board Meeting Fiscal Year 1999/2000	gs	Regulatory Activity	
October 27, 1999 December 8, 1999 February 16, 2000 April 12, 2000 June 28, 2000 August 23, 2000		Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued	208 144 130 141 112 9 4
I to our about A autobio		Board Disciplinary Actions	
Licensing Activity Pharmacists		Reprimand Probation Fine	43 25 16
Applications Received Examinations Given State Board Jurisprudence	956 320 536	Voluntary Surrender Limited License Suspension Revocation	2 13 9 3
Number of Licensees  Other Licenses	11,631	Total Disciplinary Actions	111
Applications Received New Pharmacies Manufacturer/Wholesaler	228 111		
Number of Licensees Pharmacy Manufacturer/Wholesaler	2,379 550		

#### **Michigan Board of Physical Therapy**

The Michigan Board of Physical Therapy was originally formed with the enactment of Public Act 164 of 1965. On September 30, 1978, authority was transferred to the Public Health Code by Public Act 368 of 1978, as amended. The practice of physical therapy, as defined in the Public Health Code, means: "the evaluation of treatment of an individual by the employment of effective properties of physical measures and the use of therapeutic exercises and rehabilitative physical or mental disability. It includes treatment planning, performance of tests and measurements, interpretation of referrals, instruction, consultative services, and supervision of personnel. Physical measures include massage, mobilization, heat, cold, air, light, water, electricity, and sound."

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Physical Therapy consists of 9 voting members: 5 physical therapists and 4 public members.

Board Members To	erm Expires
Riel, Linda S., L.P.T., Chair Lansing	12/31/03
Hendrickson, Christine, L.P.T., Vice Cha Negaunee	air 12/31/01
Jewell, Patricia M., Public Member Crystal Falls	er 12/31/01
Kordenbrock, Jean, Public Memb Okemos	per 12/31/01
Mageli, Christian, Public Member Dearborn	r 12/31/01
Mawby, Katie, L.P.T. Grand Haven	12/31/01

Shelton, Herman, L.P.T.	12/31/99
Detroit	
Spearman-Leach, Anthony, Public Member	12/31/99
Detroit	
Vance, Ronald L., L.P.T.	12/31/00
Gaylord	

The following appointments were made 3/24/00:

Bennett, Terry G.	12/31/03
Canton (replaced Spearn	nan-Leach)
Perry, David W.	12/31/03
Grosse Pointe Woods	
(replaced Shelton)	

#### Schedule of Board Meetings Fiscal Year 1999/2000

October 21, 1999 January 20, 2000 July 13, 2000 (DSC only)

#### **Licensing Activity**

Applications Received	485
Examinations Given	609
Number of Licensees	6,315

#### **Regulatory Activity**

Allegations Received	9
Administrative Investigations	12
Field Investigations Authorized	10
Field Investigations Completed	10
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Reprimand	0
Probation	0
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	0
Revocation	2
Total Disciplinary Actions	3

Michigan Task Force on Physician's Assistants

The Committee on Physician's Assistants was formed with the enactment of Public Act 420 of 1976, signed by the Governor on January 9, 1977. The Act regulated the practice of physician's assistants in the State of Michigan, providing a system to determine and approve the qualifications of physician's assistants, creating a committee on physician's assistants, prescribing its powers and duties, and prescribing penalties. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended and became the Task Force on Physician's Assistants.

The practice as a physician's assistant, as defined in the Public Health Code, means the practice of allopathic or osteopathic medicine under the supervision of an allopathic or osteopathic physician.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the obligation of the Board or Task Force to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Task Force by ascertaining minimal entry level competency of health practitioners. The Task Force also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Task Force on Physician's Assistants consists of 9 voting members: 5 physician's assistants, 1 physician member from each of the Boards of Medicine and Osteopathic Medicine and Surgery, and 2 public members.

#### Task Force Members Term Expires

Haskell, Gregg L., P.A., Chair	12/31/03
Houghton Lake	
Begick, Vaughn J., P.A.	12/31/03
Saginaw	

Born, Tammy L., D.O. Caledonia	12/31/01
Frank, Mary, Public Member Lansing	12/31/03
Gualdoni, Steven M., P.A., Vice Chair	12/31/03
Marquette	
Sauer, Harold, M.D.	12/31/99
Lansing	
Stavale, Ronald X., P.A.	12/31/01
Detroit	
Wallace, Sandra K., Public Member	12/31/99
Detroit	
Zaczek, Judith A., P.A.	12/31/01
Detroit	

The following appointment was made 2/18/00:

Nyhan, Sallie A., Public Member 12/31/03 Grosse Pointe Farms (replaced Wallace)

The following appointment was made 8/2/00:

Girardot, John G., M.D. 12/31/03 Battle Creek (replaced Sauer)

#### Schedule of Task Force Meetings Fiscal Year 1999/2000

March 16, 2000 September 28, 2000 (DSC only)

#### **Licensing Activity**

Applications Received	232
Number of Licensees	1,723

## **Regulatory Activity**

Allegations Received	25
Administrative Investigations	42
Field Investigations Authorized	8
Field Investigations Completed	7
Administrative Complaints Filed	3
Summary Suspensions Filed	2
Cease and Desist Orders Issued	0

## **Task Force Disciplinary Actions**

Reprimand	0
Probation	5
Fine	1
Voluntary Surrender	0
Limited License	0
Suspension	1
Revocation	0
Total Disciplinary Actions	7

# Michigan Board of Podiatric Medicine and Surgery

The Michigan Board of Podiatric Medicine and Surgery was originally formed with the enactment of Public Act 115 of 1915. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of podiatric medicine and surgery, as defined in the Public Health Code, means the examination, diagnosis, and treatment of abnormal nails, superficial excrescenses occurring on the human hands and feet, including corns, warts, callosities, and bunions, and arch troubles or the treatment medically, surgically, mechanically, or by physiotherapy of ailments of human feet or ankles as they affect the condition of the feet. It does not include amputation of human feet, or the use or administration of anesthetics other than local.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners and verifying continuing education during licensure. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Podiatric Medicine and Surgery consists of 9 voting members: 5 podiatrists and 4 public members.

<b>Board Members</b>	Term Expires
<b>Board Members</b>	Term Expires

Salter, Michael S., D.P.M., Chair	6/30/02
Rochester	0/00/04
Abraham, Thomas L., D.P.M.	6/30/01
Grand Blanc Barnes, Isabel J., Public Member	6/30/02
Stanwood	0/00/02

Brozek, Nancy, Public Member Muskegon	6/30/03
Emiley, Terrence J., D.P.M. Grand Rapids	6/30/02
Herschfus, Leon, D.D.S., Public Member Southfield	6/30/01
Johnson, Clark P., D.P.M., Vice Chair Battle Creek	6/30/01
Mills, Raymond, Public Member Bellaire	6/30/02
Potchynck-Lund, Karen, D.P.M. Shelby Twp.	6/30/03

#### Schedule of Board Meetings Fiscal Year 1999/2000

October 13, 1999 January 12, 2000 April 19, 2000 July 12, 2000 (DSC only)

#### **Licensing Activity**

71

Applications Received

Examinations Given Number of Licensees	21 799
Regulatory Activity	
Allegations Received	11
Administrative Investigations	25
Field Investigations Authorized	1
Field Investigations Completed	2
Administrative Complaints Filed	1
Summary Suspensions Filed	0
Cease and Desist Orders Issued	0

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
Limited License	1
Suspension	2
Revocation	0
Total Disciplinary Actions	3

#### Michigan Board of Psychology

The Michigan Board of Psychology was originally formed with the enactment of Public Act 257 of 1959. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The Public Health Code defines the practice of psychology as the rendering to individuals, groups, organizations, or the public of services involving the application of principles, methods, and procedures of understanding, predicting, and influencing behavior for the purposes of the diagnosis, assessment related to diagnosis, prevention, amelioration, or treatment of mental or emotional disorders, disabilities or behavioral adjustment problems bv means counseling. psychotherapy, behavior modification, hypnosis, biofeedback techniques, psychological tests, or other verbal or behavioral means. The practice of psychology does not include the practice of medicine such as prescribing drugs, performing surgery, or administering electro-convulsive therapy.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. The Board implements this responsibility by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Psychology consists of 9 voting members: 5 psychologists and 4 public members.

Board Members	Term Expires
Watson, Patricia, Ph.D., Cha Northville	ir 12/31/03
Bacarella, Margaret M., Public Men Monroe	nber 12/31/01
Bahadur, Rani, M.A. West Bloomfield	12/31/02
Burton, William, Jr., Public Member Lansing	12/31/02
Fonger, Robert C., Public Member Grand Rapids	12/31/01
Haynes, Jack, Ph.D., Vice Ch Bloomfield Hills	air 12/31/00
Johnson, Linda, Public Meml Grand Rapids	per 12/31/03
Nave, Mary, M.A. Beverly Hills	12/31/00
Weiner, Karen, Ph.D. Southfield	12/31/02

#### Schedule of Board Meetings Fiscal Year 1999/2000

November 18, 1999 January 13, 2000 March 9, 2000 May 11, 2000 July 6, 2000 September 7, 2000

#### **Licensing Activity**

Applications Received	735
Examinations Given	110
Number of Licensees	
Psychologists	2,487
Doctoral Limited	336
Masters Limited	3,341
Temporary Limited	514

# **Department of Consumer & Industry Services Bureau of Health Services**

## **Regulatory Activity**

Allegations Received	58
Administrative Investigations	43
Field Investigations Authorized	28
Field Investigations Completed	30
Administrative Complaints Filed	9
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0

Reprimand	0
Probation	2
Fine	0
Voluntary Surrender	0
Limited License	2
Suspension	5
Revocation	0
Total Disciplinary Actions	9

#### **Sanitarian Registration**

The Michigan Board of Sanitarians was originally formed with the enactment of Public Act 174 of 1963. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended. Executive Order No. 1996-2, effective May 15, 1996, transferred all the statutory authority, powers, duties, functions and responsibilities of the Board of Sanitarians under Part 184 of the Public Health Code, being Sections 333.18401 et seg. of the Michigan Compiled Laws, from the Department of Commerce to the Director of the Department of Consumer & Industry Services by a Type III transfer as defined by Section 3 of Act No. 380 of the Public Acts of 1965, as amended, being Section 16.103 of the Michigan Compiled Laws. Underlying all duties is the responsibility of the Department to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Department by ascertaining minimal entry level competency of registered sanitarians. The Department also has the obligation to take disciplinary action against registrants who have adversely affected the public's health, safety, and welfare.

Sanitarian means an individual who has specialized education and experience in the physical, biological and sanitary sciences as applied to the educational, investigational and technical duties in the field of environmental health.

#### **Registration Activity**

Applications Received	35
Examinations Given	10
Number of Registered Sanitarians	561

#### **Regulatory Activity**

Allegations Received	0
Administrative Investigations	0
Field Investigations Authorized	0
Field Investigations Completed	0
Administrative Complaints Filed	0
Summary Suspensions Filed	0

#### **Disciplinary Actions**

Reprimand	0
Probation	0
Fine	0
Voluntary Surrender	0
_imited License	0
Suspension	0
Revocation	0
Total Disciplinary Actions	0

#### Michigan Board of Social Work

The Michigan Board of Examiners of Social Workers was created under Article 16 of Public Act 299 of 1980, as amended, the Occupational Code, to register social workers in Michigan. Public Act 11 of 2000 transferred the Board of Social Work, and its authority, to the Public Health Code, Public Act 368 of 1978, as amended.

Social work is defined as the professional application of social work values, principles, and techniques to counseling or to helping an individual, family, group, or community enhance or restore the capacity for social functioning and/or provide, obtain, or improve tangible social and health services.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the board to promote and protect the public's health, safety, and welfare. The Board implements this responsibility by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Social Work consists of 9 voting members: 4 certified social workers, 2 social workers and 3 public members.

Board Members Terr	m Expires
Cunningham, Linda, S.W., Chair Detroit	12/31/02
Cronstrom, Paul, C.S.W. Harrison	12/31/01
Gust, Lawrence E., C.S.W. Grayline	12/31/01
Hernandez, Juanita, Public Member Detroit	12/31/01
Lang, Paul, Jr., Ph.D., Public Member Marquette	12/31/03

Longo, Cathy, Public Member	12/31/00
Madison Heights	
Lyberg Sr., Matthew, C.S.W.	12/31/00
Traverse City	
Reimel, Beth, C.S.W.	12/31/03
Grand Rapids	
Sanders, Lisa, C.S.W., Vice Chair	12/31/02
West Bloomfield	

#### Schedule of Board Meetings Fiscal Year 1999/2000

November 30, 1999 January 25, 2000 March 28, 2000 May 23, 2000 July 25, 2000 September 26, 2000

#### **Registration Activity**

Applications Received	1,382
(all professions - May through Sept.	only)

#### **Social Work Technicians**

Number of Registrants	1,868
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#### **Social Workers**

Number of Registrants 10,172

#### **Certified Social Workers**

Number of Registrants 12	2,7	1(	)
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#### **Regulatory Activity**

Allegations Received	30
Administrative Investigations	22
Field Investigations Authorized	25
Field Investigations Completed	12
Administrative Complaints Filed	7
Summary Suspensions Filed	1
Cease and Desist Orders Issued	0

Reprimand	0
Probation	1
Fine	0
Voluntary Surrender	0
Limited License	0
Suspension	2
Revocation	3
Total Disciplinary Actions	6

#### 1999/2000 Annual Report

# Michigan Board of Veterinary Medicine

The Michigan Board of Veterinary Medicine was originally formed with the enactment of Public Act 156 of 1956. On September 30, 1978, this authority was transferred to the Public Health Code, Public Act 368 of 1978, as amended.

The practice of veterinary medicine, as defined in the Public Health Code, means prescribing or administering a drug, medicine, treatment or method of procedure; performing an operation or manipulation; applying an apparatus or appliance; or giving an instruction or demonstration designed to alter an animal from its normal condition; curing, ameliorating, correcting, reducing, or modifying a disease, deformity, defect, wound, or injury in or to an animal; diagnosing or prognosing, or both, a disease, deformity or defect in an animal by a test, procedure, manipulation, technique, autopsy, biopsy, or other examination.

The Public Health Code mandates certain responsibilities and duties for a health professional licensing board. Underlying all duties is the responsibility of the Board to promote and protect the public's health, safety, and welfare. This responsibility is implemented by the Board by ascertaining minimal entry level competency of health practitioners. The Board also has the obligation to take disciplinary action against licensees who have adversely affected the public's health, safety, and welfare.

The Michigan Board of Veterinary Medicine consists of 9 voting members: 5 veterinarians, 1 veterinarian technician, and 3 public members.

#### Board Members Term Expires

Foster, Edward G., D.V.M., Chair	12/31/00
Charlotte	
Brown, Keith L., Public Member	12/31/01
Jonesville	
Groh, Debra, L.V.T.	12/31/00
Lansing	

Koester, Garold, D.V.M.	12/31/02
Cadillac	
Krohn, Warren J., Public Member	12/31/99
Elkton	
Moll, Constance, D.V.M.	12/31/01
Midland	
O'Handley, Patricia, D.V.M., Vice Chair	12/31/02
East Lansing	
Pridgeon, Michael, Public Member	12/31/01
Montgomery	
Reed, Willie, D.V.M.	12/31/02
Okemos	

#### Schedule of Board Meetings Fiscal Year 1999/2000

October 28, 1999 February 10, 2000 May 18, 2000 August 24, 2000

#### **Licensing Activity**

#### **Veterinarians**

Applications Received	300
Examinations Given	
National	117
CCT	118
Number of Licensees	3,399

#### **Veterinary Technicians**

Applications Received	78
Examinations Given	87
Numbers of Licensees	1,325

Regulatory Activity	
Allegations Received Administrative Investigations Field Investigations Authorized Field Investigations Completed Administrative Complaints Filed Summary Suspensions Filed Cease and Desist Orders Issued	61 94 35 36 3 0
<b>Board Disciplinary Actions</b>	
Reprimand Probation Fine	0 1 1
Voluntary Surrender Limited License	0
Suspension Revocation Total Disciplinary Actions	1 0 4